PTO/SB/17 (12-04)
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	Under
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Effective on 12/08/2004. Complete if Known					ــــــــــــــــــــــــــــــــــــــ					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		· [Application Num	ber	09/831,139					
FEE TRANSMITTAL		L			June 21, 2001					
For FY 2005			L	First Named Inv	entor	Friedrich MUELLER				
F01 F1 2005			٦.	Examiner Name Paul V. Harp			r			
Applicant claims small entity status. See 37 CFR 1.27			┙	Art Unit 2654						
TOTAL AMOUNT OF PAYMENT (\$) 2,380.00 Attorno					No.	44912200570	0			
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH	, AND EXAI	MINATION FEES								
	FILIN		EΑ	RCH FEES	EXAM	NATION FEES	3			
Application Type	Fee (\$)	Small Entity Fee (\$) Fee	(\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150 50	0	250	200	100				
Design	200	100 10	0	50	130	65		-		
Plant	200	100 30	0	150	160	80				
Reissue	300	150 50	0	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES Small Entity										
Fee Description Fee (\$)										
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100										
_	er 3 or, for R	leissues, each indepe	end	ent claim more t	nan in th	e original patent	200	100		
Multiple dependent claims				360 180						
· ——			Fee Paid (\$)			Multiple Dependent Claims Fee (\$) Fee Paid (\$)				
- 20 =	× -					Fee (\$)	ree raiu (a)			
Indep. Claims Extra	Claims	Fee (\$) Fe	θP	aid (\$)				- 1		
- 3 =										
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
- 100 = /50 (round up to a whole number) x =										
4. OTHER FEE(S) Request for continued examination (RCE) filing fee 790.00										
Other: Extension for response within four months							1,590.00			
SUBMITTED BY										
Signature	10	2/2	П	Registration No.	43,148	3 Telephone	(703) 760)-7762		
(Autorite / Agent)						February 2				
TOTAL TOTAL	Spiran	<u></u>					. 55.4417 2	-,		